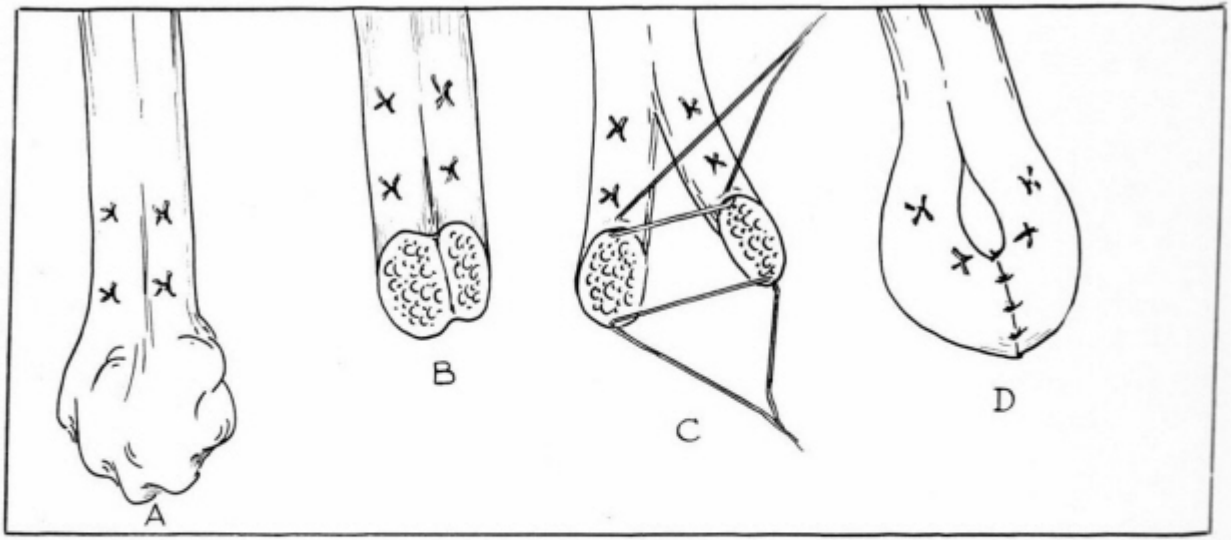

FIG. 198.—This and Figure 199 illustrate viable neuroplastic transplant for repair of tibial portion of sciatic trunk in irreparable lesions of both divisions. A, Exposure of proximal end of sciatic trunk; identification sutures placed: B, neuroma resected from both divisions; C, tibial and peroneal portions separated in line of cleavage to permit end-to-end approximation; D, end-to-end approximation uniting proximal end of tibial division to proximal end of peroneal division; E, peroneal division divided to permit degeneration of peroneal fibers in that portion of the trunk to be used as a transplant; upper end of peroneal portion injected with alcohol to prevent regeneration of peroneal fibers in transplant; F, peroneal transplant now becomes a viable part of the tibial portion of the nerve and presents a neuroma, showing complete migration of tibial fibers; G, transplant turned down and united to distal end of tibial division, filling the defect—peroneal portion having been sacrificed to repair the tibial. (See fig. 199)